

North Carolina Immunization Registry (NCIR)

Reviewing and Printing Immunization Records

User Guide

Last Updated: October 28, 2021



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**



NCDHHS COVID-19 Response

Steps for Printing Immunization Records

Step 1 of 3: Navigate to Client Search

1. From the home page, click on **Manage Client** and then search for your client's record.
2. Click on **Reports**

Personal Information - Client ID: 5999144

*Last Name	WONKA	Gender	<input checked="" type="radio"/> M <input type="radio"/> F <input type="radio"/> Unknown	<div>Save</div> <div>History/Recommend</div> <div>Reports</div> <div>Cancel</div>
*First Name	WILLIE	*Birth Date	05/01/2006	
Middle Name		*County of Residence	Wake	
*Mother's Maiden Last		Last Notice		
*Mother's First Name				

*NOTE: Fields marked with an asterisk * are required.*

Last Updated by: NORTH CAROLINA IMMUNIZATION REGISTRY on 05/18/2009

Client Information **Responsible Person(s)** **Client Comment(s)**

Eligibility Verification Date: Eligibility as reported by Responsible Person:	Provider Organization Specific Data Chart # 5678 Status Active
Ethnicity Unknown	
Race Unknown	

Audience

Reports Only

Typical User

Inventory Control

Administrator

Step 2 of 3: Select the Type of Copy

From here you can choose to view a Patient Copy by clicking on the **Site** drop down arrow and choosing your site and then click on **Immunization Record-Patient Copy**.

Reports Available for this Client	
Additional Information	Report
* Site	
* Language	Vaccine Administration
None	Immunization Record - Chart Copy
* Site	Immunization Record - Patient Copy

*NOTE: Fields marked with an asterisk * are required.*

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Note: You must have Adobe Acrobat Reader in order to view these reports.

Step 3 of 3: Print

Print the generated copy

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North Carolina Immunization Registry
Immunization Record Patient Copy
WONKA, WILLIE , 05/01/2006
TEST ORGANIZATION
111 South Street
rest updated address
Monona, WI 53704

Tracking Schedule: ACIP
Client Name (L, FM): WONKA, WILLIE
Birth Date: 05/01/2006 Gender: Male

Relationship: Father Name (L, FM): WONKA, FATHER
Address: 5601 SIX FORKS street
City: RALEIGH State: NC ZIP: 27609 Phone: (919) 707-5550

Client Comments:
Religious Exemption of Hib

Immunization History				Tracking Schedule: ACIP		
Immunization	Date Admin	Series	Trade Name	Dose	Reaction	Administered By
DTP/aP	07/02/2006	1 of 5				Wake County Pediatrics
	09/03/2006	2 of 5	Pediarix			Archdale Pediatrics
	11/08/2006	3 of 5	Pediarix			Archdale Pediatrics
	01/29/2008	4 of 5	Tripedia	Full		TEST ORGANIZATION
HepA	01/29/2008		Twinrix			TEST ORGANIZATION
HepB	05/02/2006					Wake County Pediatrics
	09/03/2006					Archdale Pediatrics

Patient Copy

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Where to Go for More Help?



Questions?

Contact your Regional Immunization Program Consultant (RIC)

The RIC Coverage Map with contact information is located on the Immunization Branch website:

<https://www.immunize.nc.gov/contacts.htm>

NC Vaccines Help Desk

1-877-873-6247

(Monday – Friday 7:00 AM – 7:00 PM ET and Saturday 8:00 AM – 4:00 PM ET)

https://ncgov.servicenowservices.com/csm_vaccine?id=immunizations&sys_id=69f035b11b037c9099510f6fe54bcbee